

**\*94293\***

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**\*N900040100\***

Setup Start \*NS1\*

Stop \*NS2\*

**Cust Item ID:**

**\*6\***

\*6\*

**Customer:**

Run Start \*NR1\*

Date: 12-12-05 Tooling:

Date:

**Date:** \_\_\_\_\_ **SPC (Y/N):** \_\_\_\_\_

**Date:**

Stop \*NR2\*

[illegible]

NCR: ☒ Yes ☐ No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: *AK*

Date: 12/12/13

QA Closed: *CK*

Date: 11

Work Order: <u>94293</u> Part No. <u>D3136-043</u> NCR No. <u>12-2125</u>				<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b> <table style="width:100%; font-size: small;"> <tr> <td>Skid-tube</td><td><input type="checkbox"/></td> <td>Crosstube</td><td><input type="checkbox"/></td> <td>Water Jet</td><td><input checked="" type="checkbox"/></td> <td>Engineering</td><td><input type="checkbox"/></td> </tr> <tr> <td>Machining</td><td><input type="checkbox"/></td> <td>Small Fab</td><td><input type="checkbox"/></td> <td>Prod. Eng. Coord.</td><td><input type="checkbox"/></td> <td>Quality</td><td><input type="checkbox"/></td> </tr> <tr> <td>Thermoforming</td><td><input type="checkbox"/></td> <td>Finishing</td><td><input type="checkbox"/></td> <td>Rec/Store/Packaging</td><td><input type="checkbox"/></td> <td>Other</td><td><input type="checkbox"/></td> </tr> <tr> <td>Large Fab</td><td><input type="checkbox"/></td> <td>Composite</td><td><input type="checkbox"/></td> <td>Supplier</td><td><input type="checkbox"/></td> <td></td><td></td> </tr> </table>						Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input checked="" type="checkbox"/>	Engineering	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coord.	<input type="checkbox"/>	Quality	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		
Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input checked="" type="checkbox"/>	Engineering	<input type="checkbox"/>																																				
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Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>																																						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																																		
Doc/Data <input type="checkbox"/> Equip/Tooling <input checked="" type="checkbox"/> Operator <input checked="" type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>	12/12/13	#100 #1	#6 x1 <u>7</u>	Found at inspection that operator has ground down on step 2 window a too unevenly & Qty ALL have blow outs from the water jet.	DAS 16 0-83 05/12/13 12/12/13	SCRAP + Destroy and Repk step 6. B 123704 34.75 243.25	B12-12-1 12/12/13	Jc. 12/12/13	DAS 16 0-83 05/12/13 12/12/13																																		
FAULT CATEGORY																																											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input checked="" type="checkbox"/> Other OPERATE ERROR in Subcontract material																																		

**Work Order ID 94293****\*94293\***

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Item ID: D3136-043

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Window Assembly

Start Date: 12/5/2012 Start Qty: 6.00

**\*6\***

Cust Item ID:

Required Date: 12/6/2012 Req'd Qty: 6.00

**\*6\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
<b>*130*</b>	THERMOFORMING MACHINE								
Thermoform	<b>Memo</b>	0.00							
Thermoforming Machine	1-Deburr if necessary								
	2-Thermoform as per Dwg D3136 and Folio FTA002								
	Dwg Rev. <u>E</u>								
	Folio Rev. <u>C.</u>								
	3- Engrave Part # and Batch # , and affix labels (D3136-3)								
140		0.00							
<b>*140*</b>	HAND FINISHING THERMOFORMING								
Thermoform	<b>Memo</b>	0.00							
Thermoforming Machine	Water sand and buff to remove scratches as required								

**\*94293\***

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**\*N900040100\***

Setup Start \*NS1\*

Stop **\*NS2\***

**Start Date:** 12/5/2012      **Start Qty:** 6.00      **\*6\***

**Required Date:** 12/6/2012      **Req'd Qty:** 6.00      **\*6\***

**Reference:**

**Approvals:** \_\_\_\_\_ **Process Plan:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Tooling:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

**Insp.  
Stamp**

**\*150\***

## Quality Control

**\*170\***

## Quality Control

Inspect edge and window deformation, wrap in plastic

Identify as per dwg & Stock Location ST216 0.00

**\*180\***

0.00

## Packaging

NCR: Yes / No**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: <u>94293</u> Part No. <u>D3136-043</u> NCR No. _____				<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b> <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input checked="" type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/> Equip/Tooling <input checked="" type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>	<u>12/12/06</u>	<u>#1</u>	<u>150</u>	<u>window scrap due to having burrs on out side of window.</u>	<u>DAS 16</u> <u>9-89</u> <u>OS 7042</u> <u>12/12/06</u>	<u>Scrap + Destroy</u> <u>Off #1</u> <u>W/O Rehe.</u>	<u>12/12/06</u>	<u>DAS 16</u> <u>9-89</u> <u>OS 7042</u> <u>12/12/06</u>	<u>OS 7042</u> <u>12/12/06</u>			
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other			

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Item ID: D3136-043      Accept      **\*N900040100\***      Setup Start **\*NS1\***  
Revision ID:      Stop **\*NS2\***  
Item Name: Window Assembly  
Start Date: 12/5/2012      Start Qty: 6.00      **\*6\***      Cust Item ID:  
Required Date: 12/6/2012      Req'd Qty: 6.00      **\*6\***      Customer:  
Reference:

Approvals:      Process Plan:      Date:      Tooling:      Date:      Run Start **\*NR1\***  
QC:      Date:      SPC (Y/N):      Date:      Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
190	QC21- Final Inspection - Work Order Release	0.00							
<b>*190*</b>									
QC	Memo	0.00							
Quality Control									

12/12/10 *[Signature]*  
12-12-05

# Picklist Print

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Work Order ID: 94293  
Parent Item: D3136-043  
Parent Item Name: Window Assembly

Start Date: 12/5/2012 Required Date: 12/6/2012  
Start Qty: 6.00 Required Qty: 6.00

Comments: IPP Rev:A04.02.04New issueKJ/DS  
IPP Rev.B 07.05.29 Thermoform in-house DL  
IPP rev C 07.09.28 Rev E dwg EC verified by:DD IPP Rev:D 10.06.24 added note in qc5  
seq 170 DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3108-9 Decal		Manufactured	No			100	Each	538.0000	2	12			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST026		538							
				34554		38				12			
				46546		500							
MACRLICS.125 1/8" Polycast II Sheet		Purchased	No			170	sf	523.8935	3.9	23.4			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				MAT019		523.8935							
				110633		3							
				117324		0.2467							
				117431		10.7967							
				119591		15.16							
				121850		44.5456							
				123704		106.4				123764			
				123895		343.7445							

12/12/00

1812-12-6











